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06-20-01

PTO/SB/05 (11-00)

Approved for use through 10/31/02. OMB 0651-0032

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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

Attorney Docket No. 223002010005  
First Inventor Michael HOUGHTON  
Title HEPATITIS C VIRUS PROTEASE  
Express Mail Label No. EL569236441US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

**CERTIFICATE OF MAILING BY "EXPRESS MAIL"**

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Date of Deposit: June 18, 2001

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.

Jacqueline L. Lim

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

**ADDRESS TO:**

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☐ Fee Transmittal Form (e.g. PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27
3. ☒ Specification [Total Pages 47]  
(preferred arrangement set forth below)  
- Descriptive title of the Invention  
- Cross Reference to Related Applications  
- Statement Regarding Fed sponsored R & D  
- Reference to sequence listing, a table, or a computer program listing appendix  
- Background of the Invention  
- Brief Summary of the Invention  
- Brief Description of the Drawings (if filed)  
- Detailed Description  
- Claim(s)  
- Abstract of the Disclosure
4. ☒ Drawing(s) (35 USC 113) [Total Sheets 23]
5. Oath or Declaration [Total Pages 2]  
a. ☐ Newly executed (original or copy)  
b. ☒ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)  
**DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
6. ☒ Application Data Sheet. See 37 CFR 1.76 (2 pages)

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)  
a. ☐ Computer Readable Form (CRF)  
b. Specification Sequence Listing on:  
i. ☐ CD-ROM or CD-R (2 copies); or  
ii. ☐ paper  
c. ☐ Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (where there is an assignee) ☐ Power of Attorney
11. ☐ English Translation document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
Should be specifically itemized
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other Patent Application Fee Determination Record (1 page)

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76.

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: 09/253,230 filed 2/19/99  
Prior application information Examiner W. Moore Group / Art Unit 1652

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

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25226

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Signature Gladys H. Monroy Date June 18, 2001

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## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

223002010005

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))				\$355.00	OR		\$710.00
TOTAL CLAIMS (37 CFR 1.16(c))	26 minus 20 =	6	x\$9.00	\$	OR	\$18.00	\$108.00
INDEPENDENT CLAIMS (37 CFR 1.16(b))	6 minus 3 =	3	x\$40.00	\$	OR	\$80.00	\$240.00
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+\$135.00	\$	OR	\$270.00	\$0
			TOTAL	\$	OR	TOTAL	\$1058.00

\*If the different in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIO NAL FEE		RATE	ADDI TIONAL FEE
Total (37 CFR 1.16(c))		Minus		=*	x\$9.00	\$*	OR	\$18.00	\$*
Independent (37 CFR 1.16(b))		Minus		=*	x\$40.00	\$*	OR	\$80.00	\$*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$135.00	\$*	OR	+\$270.00	\$*
					TOTAL ADDIT. FEE	\$*	OR	TOTAL ADDIT. FEE	\$*

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI TIONAL FEE		RATE	ADDI TIONAL FEE
Total (37 CFR 1.16(c))		Minus		=*	x\$9.00	\$*	OR	\$18.00	\$*
Independent (37 CFR 1.16(b))		Minus		=*	x\$40.00	\$*	OR	\$80.00	\$*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$135.00	\$*	OR	+\$270.00	\$*
					TOTAL ADDIT. FEE	\$*	OR	TOTAL ADDIT. FEE	\$*

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI TIONAL FEE		RATE	ADDI TIONAL FEE
Total (37 CFR 1.16(c))		Minus		=*	x\$9.00	\$*	OR	\$18.00	\$*
Independent (37 CFR 1.16(b))		Minus		=*	x\$40.00	\$*	OR	\$80.00	\$*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$135.00	\$*	OR	+\$270.00	\$*
					TOTAL ADDIT. FEE	\$*	OR	TOTAL ADDIT. FEE	\$*

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

Burden Hours Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231